

ROLE OF AGNIKARMA ALONG WITH SHAD-DHARAN YOG IN GRIDHRASI (SCIATICA) – A CASE STUDY

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ABSTRACT

Objective: Purpose of the study was to evaluate the efficacy of *Agnikarma* therapy performed by innovated *Agnikarma* probe (*Ankush mukhi rajat shalaka*) made by Silver and one oral drug *Shad-dharan yog* in a case of Sciatica. **Clinical features:** A 40 years average built female patient(S-11599/43243) with chief complaint of lower back pain which radiates towards the left leg since last three months. **Intervention and Result:** Four sittings of *Agnikarma* procedure (weekly once) along with *Shad-Dharan Yog* (3gm twice daily) with lukewarm water was given for four weeks. All complaints of the patient gradually receded within the due course of treatment.

KEYWORDS: *Gridhrasi* (sciatica), *Agnikarma* probe, *Vatvyadi*,

Shad-dharan yog.

INTRODUCTION

Arcane knowledge of *Ayurveda* is well known and apposite by present era. *Ayurveda* is assuaging since the Vedic period. Though modernization has made our daily chores easier and saved many precious working hours, but it also added many lifestyle diseases, e.g. obesity, Hand-arm Vibration Syndrome (HAVS), etc. According to the article in 'The Lancet' worldwide 540 million people are affecting by the lower back pain, and in India it is a 4th highest cause of disability.^[1] *Gridhrasi* (Sciatica) is considered as life style disease. More than a disease, it is a symptom. The confirmatory sign of *Gridhrasi* (sciatica) is radiating pain from lower back to planter surface of the foot. It occurs due to spinal nerve

irritation and characterized by distinct nature of pain in distribution of sciatic nerve. *Gridhrasi* (Sciatica) is one of the eight *Vatvyadhi* mentioned in various Ayurvedic texts, which is caused by aggravated *Vata dosha*. It is a *Ruja Pradhana Vyadhi* (painful condition). On the basis of symptoms of *Gridhrasi* [*Toda* (pain), *Spandana* (pulsation), *Graha*, *Stambha* (stiffness) and *Vedana* from *Kati-Pradesha* to *Padanguli* (radiating pain from lower back to foot,^[2] it corresponds with the disease ‘Sciatica’ in modern. If a patient consults an allopathic specialist, he is usually prescribed NSAIDs (commonly recommended as first line of treatment), or Botulinum toxin injection, steroids, anticonvulsants, surgery (partial and complete), etc., but there is no permanent, painless and cost effective treatment to treat Sciatica as we have in *Ayurveda*.

Agnikarma (Therapeutic cauterization), a parasurgical procedure, was an arcane therapy in ancient time. Very few people were skilled to perform it. But as the time passes, it dragged the attention of research scholars because of its quick relief action and many studies have been done till today. Different metals and materials (Pippali, Honey, etc.) have been tried, we took *Ankush mukhi Rajat Shalaka* (Hook like silver Cauterization probe) for the clinical study, due to high conductivity nature of the silver and its hook like shape for better execution of the procedure.^[3,4]

Shad-dharan yog as its name indicates its meaning, i.e. “*Shad*” in Sanskrit stands for ‘six’ and ‘*dharan*’ stands for ‘a measuring unit’ used in ancient time, which is approximately 3 gms. All the six contents, in clean and dry form, are taken in equal amount to form fine powder. *Acharya Sushruta* has mentioned its indication in “*Amashyagata Vata*” and has clearly indicated that it should be taken for seven days, with lukewarm water after therapeutic emesis. Aggravated *Vata* in *Amashya* causes vomiting, vertigo, thirst, catching pain in chest and flanks. In *Gridhrasi*, *Vata* and *Kapha* are main *doshas*, so *Shad-dharan yog* will be beneficial in this condition.^[5]

MATERIAL AND METHOD

Agnikarma and *Shad-Dharan Yog* 3gm B.D. with luke warm water.

Case report

A 40 year aged, average built, female patient came to *Shalya* O.P.D of Rishikul campus, Uttarakhand Ayurved University, Haridwar with chief complaint of lower back pain radiating down towards the left leg, since last three months. The patient also had stiffness, numbness,

heaviness, tingling sensation in left leg along with poor appetite, on and off, since last 20 years. Initially she ignored the problem, but three months back, she noticed the pain disturbing her daily routine activities. So she consulted nearby doctor and underwent allopathic treatment. She got relieved temporarily, but the condition reoccurred. She used to take painkillers from local medical stores by herself. Initially she used to take one tablet in a week, but gradually she had to increase the dose (one tablet daily), as her problem was increasing. Then she came to Rishikul Ayurvedic college hospital, Haridwar, in search of better treatment for her problem.

On examination

Patient has normal gait, but she complained of difficulty in standing as well as sitting in squatting position for more than 5 minutes, as severe pain starts in her lower back. She also has tingling sensation and stiffness in left leg. SLR was 55° and 80° in left and right leg respectively. She has no history of surgery, no family history of DM, HTN, T.B, etc. *Sharirik Prakriti* was *Vata – Kaphaj* and *Rajsik Manas Prakriti*. *Abhayavaran* and *Jaran shakti* was *Madhyam*. Dyspepsia and loss of appetite was present. She was having mild tenderness around umbilicus. Bowel habit was irregular, she has sound sleep. B.P was 112/82 mmHg, Pulse Rate 78/min, height 5'.2'', and weight 70 kg.

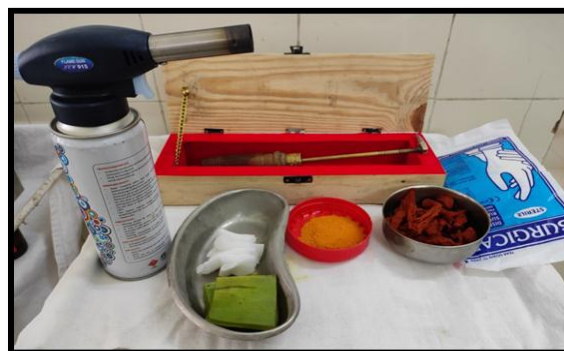
Counseling of the patient was done regarding her management by *Agnikarma* procedure. Patient was satisfied and willingly gave her consent for *Agnikarma* procedure. Patient was given next day time for her treatment in our hospital. She was advised to come after having her normal breakfast.

Purva-karma (Pre-procedural measure)

The therapy room was sterilized and well equipped. Informed consent was taken. All the required materials like betadine liquid and sterilized gauze, butane gas cylinder, *Agnikarma* probe, aloe vera etc. was arranged. Then the probe was kept on burner flame till it became red hot. It took around 8 seconds to make the *Agnikarma* probe to become red hot. At that time temperature of the *Agnikarma* probe was approx 220 degree Fahrenheit which was visible on "Temperature controller (Thermocouple)".



Thermocouple



Required materials

Pradhan – Karma (Main procedure)

Site of <i>agnikarma</i>	Type of <i>agnikarma</i>	Selected <i>dravya</i>
Most tender points on lower back, thigh, calf	<i>Bindu</i> (dot)	Ankush Mukhi Rajat Shalaka (Hook shape Agnikarma probe)

The patient was made to lie on the table in prone position. The most tender points on lower back and thigh region was marked with the help of a marker. The *Agnikarma* site was painted with betadine liquid. Patient was informed about beginning of Agnikarma procedure and advice him to keep his body relaxed. Then red hot *Agnikarma* probe tip was gently applied on the marked points quickly so as to make 15-20 Agnikarma marks and immediately aloe-vera pulp was applied.

Patient was comfortable during the procedure. His vitals were normal.



Agnikarma procedure

Paschat-karma (Post-procedural measure)

After one minute the part was dressed with sterile gauze after sprinkling pinch of Haridra (turmeric) powder. The patient was allowed to go home after 30 minute observation. No complaint was observed. The patient told that she felt better and the intensity of the pain got relieved instantly.

She was advised to apply *Madhu* (honey) and *Ghrita* (Ghee) twice daily for one week and the site of *Agnikarma* to be protected from water for next 24 hours.

A total of four *Agnikarma* sitting (weekly) were successfully performed under aseptic conditions. After 4th sitting of *Agnikarma* patient got complete relief from the symptoms. The patient was advised to visit hospital O.P.D. for follow up after 15 days.



Post agnikarma

RESULT

Sciatica frequency index^[6]

	Not at all	Very rarely	A few times	About half the day	Usually	Almost always	Always
	0	1	2	3	4	5	6
Leg pain					✓		
Numbness or tingling sensation in foot or groin					✓		
Weakness in leg or foot			✓				
Back or leg pain while sitting					✓		

Observations during agnikarma procedure

S. no.	Sign & Symptom	B.T.	D7	D14	D21	D28
1.	Leg pain	4	3	1	1	0
2.	Numbness or tingling sensation in foot or groin	4	1	1	1	0
3.	Weakness in leg or foot	2	0	0	0	0
4.	Back or leg pain while sitting	4	1	0	0	0
5.	Difficulty in walking	1	0	0	0	0
6.	<i>Tandra</i>	Present	Present	Present	Present	Reduced
7.	<i>Gaurava</i> (heaviness in the leg)	Present	Present	Absent	Absent	Absent
8.	<i>Aruchi</i> (Anorexia)	Present	Reduced	Absent	Absent	Absent
9.	Stiffness	Present	Present	Absent	Absent	Absent
10.	S.L.R	Rt leg - 80° Lt leg - 55°	Rt leg-80° Lt leg -70°	Rt leg - 90° Lt leg - 80°	Rt leg-90° Lt leg-80°	Rt leg-90° Lt leg-80°

Patient had Leg pain, numbness or tingling sensation in foot or groin, weakness in leg, pain while sitting and standing, heaviness in leg, anorexia, stiffness before starting the treatment as mentioned in Sciatica frequency index.

After the 4th Sitting (28th Day) of *Agnikarma* procedure with *Shad-Dharan Yog orally* (3gm B.D). With luke warm water patient got complete relief in her complaints.

Probable mode of action of *agnikarma*

Ushna Guna of *Agnikarma* is contrary of *Vataj* and *Kaphaj doshas*, hence it will cure *Vataj* and *Kaphaj* disorders.^[7] In *Ayurveda* it is mentioned that every *dhatu* has its own energy (*Dhatvagni*). Decrease in that energy causes diseases. *Agnikarma* therapy basically act on *Dhatvagni* (specific energy of every *Dhatu*) level and increases it. The increased *Dhatvagni* helps to normalize the aggravated *Doshas*.

Agnikarma increases local heat to the muscle which results in normalization of blood circulation thereby release of local pressure on nerve, relaxes the muscle, removal of unwanted metabolites, decrease in pressure on nerves resulting reduction in intensity of pain.

Gate control theory^[8]

The pain stimuli which is transmitted by afferent pain fibers are blocked by gate mechanism located at the posterior grey horn of spinal cord. If gate is closed by other stimuli, pain is suppressed, means pain signals are not free to reach the brain.

Nerve fibers can be classified by into three types according to their conduction velocity – A, B and C. these fibers carry pain signals to the spinal cord then to the brain. The nerve fibers project to the substantia gelatinosa of the dorsal horn the first central transmission cells of the spinal cord.

When the pain signals carried by the small fibers (A-delta and C fibers) are less intense then the other non sensory signals like touch, temperature, etc. non pain signals inhibit the release of glutamate and substance P from the pain fibers. This closes the gate and the pain transmission is blocked.

CONCLUSION

Sciatica can be a challenging symptom and its agony is something that a person never wanted to go through in his day to day life. *Agnikarma* should be thought as a quick pain reliever in

Sciatica and in other painful musculoskeletal conditions. *Shad-dharan yog* can be used as an antispasmodic, muscle relaxant, anti inflammatory and anti-oxidant in various patients suffering from *Gridhrasi*.^[9,10,11,11,13,14,15]

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